



Docket No.: 95-379

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

GASPAR

Serial No.: 09/725,088

Filed: November 29, 2000

Group Art Unit: 2662

Examiner: LEVITAN, Dmitry

For: ARRANGEMENT FOR VERIFYING RANDOMNESS OF TBEB
ALGORITHM IN A MEDIA ACCESS CONTROLLER

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED

JUL 02 2004

Technology Center 2600

Sir:

INTRODUCTORY COMMENTS

In response to the Office Action mailed March 25, 2004, please amend the application as follows:

REMARKS begin on page 2 of this paper.

2662



| | | | |
|--|------|----------------------|-------------------|
| <p align="center">REPLY/AMENDMENT FEE TRANSMITTAL</p> | | Attorney Docket No. | 95-379 |
| | | Application Number | 09/725,088 |
| | | Filing Date | November 29, 2000 |
| | | First Named Inventor | GASPAR |
| | | Group Art Unit | 2662 |
| AMOUNT ENCLOSED | \$ 0 | Examiner Name | LEVITAN, Dmitry |

| FEE CALCULATION (fees effective 4/01/2004) | | | | | |
|---|----------------------------------|------------------------------------|------------------|-------------|--------------|
| CLAIMS AS AMENDED | Claims Remaining After Amendment | Highest Number Previously Paid For | Number Extra | Rate | Calculations |
| TOTAL CLAIMS | 20 | 20 | 0 ⁽³⁾ | X \$18.00 = | \$0 |
| INDEPENDENT CLAIMS | 3 | 3 | 0 | X \$84.00 = | \$0 |
| <p>RECEIVED JUL 02 2004</p> | | | | | \$ 0 |
| If Statutory Disclaimer under Rule 20(d) is enclosed, add fee (\$110) Technology Center 2600 | | | | | +\$0 |
| Total of above Calculations = | | | | | \$0 |
| Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27 & 1.28) | | | | | - |
| TOTAL FEES DUE = | | | | | \$0 |
| <small>(1) If entry (1) is less than entry (2), entry (3) is "0". (2) If entry (2) is less than 20, change entry (2) to "20". (4) If entry (4) is less than entry (5), entry (6) is "0". (5) If entry (5) is less than 3, change entry (5) to "3".</small> | | | | | |

| METHOD OF PAYMENT | |
|--------------------------|--|
| <input type="checkbox"/> | Check enclosed as payment. |
| <input type="checkbox"/> | Charge "TOTAL FEES DUE" to the Deposit Account No., below. |

| AUTHORIZATION | |
|--|---------|
| <input checked="" type="checkbox"/> If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees under 37 CFR 1.16 or 1.17 necessary to maintain pendency of the present application to: | |
| Deposit Account No.: | 50-0687 |
| OrderNo.: (Client/Matter) | 95-379 |

| SUBMITTED BY: MANELLI DENISON & SELTER PLLC | | | |
|---|-------------------|----------|---------------|
| Typed Name | Leon B. Turkevich | Reg. No. | 34,035 |
| Signature | | Date | June 25, 2004 |